



RCE

PTO/SB/21 (08-00)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/687,655
Filing Date	October 20, 2003
First Named Inventor	Jun KOYAMA
Group Art Unit	2629
Examiner Name	P. Dharia
Total Number of Pages in This Submission	Attorney Docket Number
	0756-7206

ENCLOSURES (check all that apply)

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input type="checkbox"/> Amendment / Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input checked="" type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers
<i>(for an Application)</i>
<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Declaration and Power of Attorney
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosures
1. Request for Continued Examination (RCE)
2.
3.
4.
5.
6. |
| Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-2280 for the above identified docket number. | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165
Signature	
Date	October 31, 2007

CERTIFICATE OF MAILING

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Type or printed name	Adele M. Stamper
Signature	
	Date
	October 31, 2007

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FEE TRANSMITTAL FOR FY 2007

Effective 09/30/2007. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27.**TOTAL AMOUNT OF PAYMENT .** (\$810.00)*Complete if Known*

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Attorney Docket No.	0756-7206

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

50-2280

Deposit Account Name

Robinson Intellectual Law Office

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 and credit overpayments

- Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

- Check Credit Card Money Order Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1001	310	2001 155 Utility filing fee	
1111	510	2111 255 Search fee	
1311	210	2311 105 Examination fee	
Over 100 Sheets/260 for each additional 50			

SUBTOTAL (1) (\$)**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =	X \$50 =	
Independent Claims	-3** =	X \$210 =	
Multiple Dependent		=	

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1202	50	2202 25 Claims in excess of 20	
1201	210	2201 105 Independent claims in excess of 3	
1203	370	2203 185 Multiple dependent claim, if not paid	
1204	210	2204 105 ** Reissue independent claims over original patent	
1205	50	2205 25 ** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051 65 Surcharge - late filing fee or oath		
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet		
1053	130	1053 130 Non-English specification		
1812	2,520	1812 2,520 For filing a request for <i>ex parte</i> reexamination		
1804	920*	1804 920* Requesting publication of SIR prior to Examiner action		
1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action		
1251	120	2251 60 Extension for reply within first month		
1252	460	2252 230 Extension for reply within second month		
1253	1,050	2253 525 Extension for reply within third month		
1254	1,640	2254 820 Extension for reply within fourth month		
1255	2,230	2255 1,115 Extension for reply within fifth month		
1401	510	2401 255 Notice of Appeal		
1402	510	2402 255 Filing a brief in support of an appeal		
1403	1,030	2403 515 Request for oral hearing		
1451	1,510	1451 1,510 Petition to institute a public use proceeding		
1452	510	2452 255 Petition to revive - unavoidable		
1453	1,540	2453 770 Petition to revive - unintentional		
1501	1,440	2501 720 Utility issue fee (or reissue)		
1502	820	2502 410 Design issue fee		
1503	1,130	2503 565 Plant issue fee		
1462	400	1462 400 Petitions, Group I		
1463	200	1463 200 Petition, Group II		
1464	130	1464 130 Petitions, Group III		
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)		
1806	180	1806 180 Submission of Information Disclosure Stmt		
8021	40	8021 40 Recording each patent assignment per property (times number of properties)		
1809	810	2809 405 Filing a submission after final rejection (37 CFR § 1.129(a))		
1810	810	2810 405 For each additional invention to be examined (37 CFR § 1.129(b))		
1801	810	2801 405 Request for Continued Examination (RCE)		\$810.00
1802	900	1802 900 Request for expedited examination of a design application		
Other fee (specify) _____				
* Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$) 810.00

CERTIFICATE OF MAILING

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SUBMITTED BY*Complete (if applicable)*

Name (Print/Type)	Eric J. Robinson	Registration No. (Attorney/Agent)	38,285	Telephone	(571) 434-6789
Signature				Date	October 31, 2007